

OAHU CANDIDATES-
SUBMIT 1 ORIGINAL AND 1 COPY

NEIGHBOR ISLAND CANDIDATES-
SUBMIT 1 ORIGINAL AND 2 COPIES

STATE OF HAWAII
CAMPAIGN SPENDING COMMISSION

DISCLOSURE REPORT
CANDIDATE COMMITTEE

RECEIVED

2006 JUL 25 PM 3:41

PLEASE TYPE OR PRINT CLEARLY WITH INK (INSTRUCTIONS FOR COMPLETING THE DISCLOSURE REPORT CAN BE FOUND IN THE "GUIDEBOOK FOR CANDIDATE COMMITTEES.")

SECTION I-CANDIDATE AND CANDIDATE COMMITTEE:

(a) Candidate Name:

THOMAS CERIZO

(b) Committee Name:

FRIENDS OF TOM CERIZO

(c) Mailing Address:

1877 WILIPA LOOP #3
WAILUKU HI 96793

(d) Phone (Bus)

669-3690

(Res)

242-9424

Treasurer's

SECTION II-TYPE OF REPORT:

(See the Schedule of Reporting Dates to complete this section)

- ☒ 1st Preliminary Primary ☐ Amended ☐ First ☐ Third
- ☐ 2nd Preliminary Primary ☐ Short Form ☐ Second ☐ Fourth
- ☐ Final Primary
- ☐ Preliminary General
- ☐ Final Election Period
- ☐ Supplemental

REPORTING PERIOD

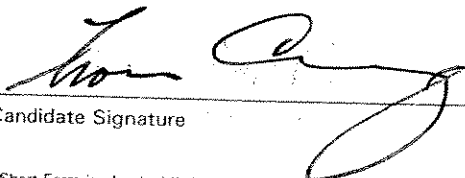
11/2006 through 6/30/2006

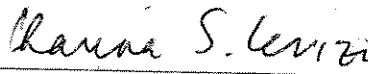
SECTION III-SUMMARY OF RECEIPTS AND DISBURSEMENTS

(Complete Section IV on the Back of this Form Before Completing This Section)

	COLUMN A TOTAL THIS PERIOD	COLUMN B ELECTION PERIOD ² TOTAL TO DATE
1. Cash on Hand at the Beginning of the Election Period ²		0
2. Cash on Hand at the Beginning of this Reporting Period.....	0	
3. Total Receipts (From Line 15).....	4485	
4. Subtotal (Add Lines 2 and 3 for Column A and Lines 1 and 3 for Column B).....	4485	4485
5. Total Disbursements (not including Unpaid Expenditures) (From Line 19).....	0	0
6. Cash on Hand at the Closing of this Reporting Period (Subtract Line 5 from Line 4)....	4485	4485
7. Total Loans at the Closing of this Reporting Period.....	0	
8. Total Unpaid Expenditures at the Closing of this Reporting Period.....	2718	
9. Debts Owed at the Closing of this Reporting Period (Add Lines 7 and 8).....	0	
10. Surplus/Deficit (Subtract Line 9 from Line 6).....	4485	

I hereby certify that the information on this report and all attached Schedules are true, correct and complete to the best of my knowledge.

Candidate Signature  7/24/06
Date

Treasurer Signature  7/24/06
Date

¹ Short Form is checked if the candidate is filing a Preliminary, Final or Supplemental Report and has aggregate contributions and aggregate expenditures for the reporting period totaling \$2,000 or less.

² An Election Period is the two-year period between general election days if a candidate is seeking nomination or election to a two-year office and the four-year period between general election days if a candidate is seeking nomination or election to a four-year office.

SECTION IV-DETAILED SUMMARY OF RECEIPTS AND DISBURSEMENTS
(If Necessary, Complete Schedules A through E Before Completing This Section)

RECEIPTS	COLUMN A TOTAL THIS PERIOD	COLUMN B ELECTION PERIOD TOTAL TO DATE	
11. Contributions From:			11
(a) Individuals/Other Entities/Noncandidate Committees/Political Parties			11(a)
(i) Monetary and Non-Monetary Contributions of \$100 or Less.....	565		11(a)(i)
(ii) Monetary and Non-Monetary Contributions of More Than \$100.....	3920		11(a)(ii)
(iii) Subtotal (Add Lines 11(a)(i) and 11(a)(ii)).....	4485		11(a)(iii)
(b) Candidate or Candidate's Immediate Family			11(b)
(i) Monetary and Non-Monetary Contributions of \$100 or Less.....	—		11(b)(i)
(ii) Monetary and Non-Monetary Contributions of More Than \$100.....	—		11(b)(ii)
(iii) Subtotal (Add Lines 11(b)(i) and 11(b)(ii)).....	—		11(b)(iii)
12. Total Contributions (Add Lines 11(a)(iii) and 11(b)(iii)).....	4485		12
13. Public Funds and Other Receipts.....	0		13
14. Loans.....	0		14
15. Total Receipts (Add Lines 12 through 14).....	4485		15
DISBURSEMENTS			
16. Expenditures.....			16
17. Loans Repaid or Forgiven.....			17
18. Unpaid Expenditures Paid or Forgiven.....			18
19. Subtotal Disbursements (Add Lines 16 through 18).....			19
20. Unpaid Expenditures.....	2718		20
21. Total Disbursements (Add Lines 19 and 20).....	2718		21

CHECK ONLY ONE BOX
USE SEPARATE SCHEDULE(S) FOR EACH CATEGORY BELOW

☒ INDIVIDUALS/OTHER ENTITIES/NONCANDIDATE
COMMITTEES/POLITICAL PARTIES

☐ CANDIDATE OR CANDIDATE'S IMMEDIATE FAMILY

STATE OF HAWAII CAMPAIGN SPENDING COMMISSION

SCHEDULE A MONETARY AND NON-MONETARY CONTRIBUTIONS CANDIDATE COMMITTEE

NO INFORMATION OR COPIES FROM THE REPORTS SHALL BE SOLD OR USED BY ANY PERSON FOR THE PURPOSE OF SOLICITING CONTRIBUTIONS OR FOR ANY COMMERCIAL PURPOSE.

CANDIDATE AND CANDIDATE COMMITTEE NAME:

TOM CARLZO

PAGE 1 OF 1

DATE OF DEPOSIT OR RECEIPT OF NON-MONETARY CONTRIBUTION	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF DONOR	FOR AGGREGATES OF \$1,000 OR MORE NAME OF EMPLOYER	AMOUNT OF CONTRIBUTION OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD	AGGREGATE ELECTION PERIOD TOTAL TO DATE
	IF A DEPENDENT MINOR, ENTER NAME OF PARENT	OCCUPATION		
<i>5/1/06</i>	<input type="checkbox"/> NON-MONETARY CONTRIBUTION <i>GOP Party</i>		<i>500</i>	
<i>5/1/06</i>	<input type="checkbox"/> NON-MONETARY CONTRIBUTION <i>Michelle Lee</i> <i>1404 100TH AVE NE</i> <i>BELLEVUE WA 98004</i>		<i>100</i>	✓
<i>5/25</i>	<input type="checkbox"/> NON-MONETARY CONTRIBUTION <i>CHARLES KAMAI</i> <i>94-240 PAPUKA HI ST 208</i> <i>WAIKANAHI HI 96191</i>		<i>250</i>	✓
<i>5/26</i>	<input type="checkbox"/> NON-MONETARY CONTRIBUTION <i>MILES KAWASAKI</i> <i>PO BOX 918</i> <i>WAILUKU HI 96793</i>		<i>250</i>	✓
<i>5/26</i>	<input type="checkbox"/> NON-MONETARY CONTRIBUTION <i>UNITED AUTO PARTS</i> <i>PO BOX 518</i> <i>KAHULUI HI 96732</i>		<i>370</i>	✓
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION			

1. SUBTOTAL OF MONETARY AND NON-MONETARY CONTRIBUTIONS THIS PERIOD (This Page).....
2. TOTAL MONETARY AND NON-MONETARY CONTRIBUTIONS THIS PERIOD (Last Page Only) (Transfer total
to the applicable Line Number of the Disclosure Report - 11(a)(ii) or 11(b)(ii)).....

1470

CHECK ONLY ONE BOX
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☒ INDIVIDUALS/OTHER ENTITIES/NONCANDIDATE COMMITTEES/POLITICAL PARTIES

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CANDIDATE AND CANDIDATE COMMITTEE NAME: _____

PAGE 2 OF 4

DATE OF DEPOSIT OR RECEIPT OF NON-MONETARY CONTRIBUTION	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF DONOR IF A DEPENDENT MINOR, ENTER NAME OF PARENT	FOR AGGREGATES OF \$1,000 OR MORE	AMOUNT OF CONTRIBUTION OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD	AGGREGATE ELECTION PERIOD TOTAL TO DATE
		NAME OF EMPLOYER OCCUPATION		
↓	<input type="checkbox"/> NON-MONETARY CONTRIBUTION MARI BABE PO BOX 238 WAILUKU HI 96793		100	
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION ELANA WALKER 1268 W. HIA HIA PL WAILUKU HI 96793		100	
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION DARRIEL OISHI 375 S. LANAI ST. KAHULUI HI 96732		100	
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION THOMAS DELMORE 1877 WILI PA LOOP #2 WAILUKU HI 96793		100	
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION MICHAEL ROCCO 3336 KIHAPAI PL PAKALANI HI 96768		200	
6/1	<input type="checkbox"/> NON-MONETARY CONTRIBUTION LUCIA CHOI 102 PAPA HI LOOP KAHULUI HI 96732		100	
1. SUBTOTAL OF MONETARY AND NON-MONETARY CONTRIBUTIONS THIS PERIOD (This Page).....			700	
2. TOTAL MONETARY AND NON-MONETARY CONTRIBUTIONS THIS PERIOD (Last Page Only) (Transfer total to the applicable Line Number of the Disclosure Report - 11(a)(ii) or 11(b)(ii)).....				

Form CC-5(A) (Rev. 5/99)

With the exception of loans and unpaid expenditures that are forgiven, non-monetary contributions must also be reported as an "Expenditure" on Schedule B.

CHECK ONLY ONE BOX
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COMMITTEES/POLITICAL PARTIES

☐ CANDIDATE OR CANDIDATE'S IMMEDIATE FAMILY

STATE OF HAWAII
CAMPAIGN SPENDING COMMISSION

SCHEDULE A
MONETARY AND NON-MONETARY CONTRIBUTIONS
CANDIDATE COMMITTEE

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CANDIDATE AND CANDIDATE COMMITTEE NAME:

PAGE 3 OF 4

DATE OF DEPOSIT OR RECEIPT OF NON-MONETARY CONTRIBUTION	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF DONOR	FOR AGGREGATES OF \$1,000 OR MORE NAME OF EMPLOYER	AMOUNT OF CONTRIBUTION OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD	AGGREGATE ELECTION PERIOD TOTAL TO DATE
	IF A DEPENDENT MINOR, ENTER NAME OF PARENT	OCCUPATION		
6/7	<input type="checkbox"/> NON-MONETARY CONTRIBUTION JOY YANAGITA 33 MALU HUA ST. WAILUKU HI 96793	ATTORNEY	400	
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION WILLIAM + KLAIRIE MASSOTI 130 PRISON ST LAHAINA HI 96761		250	
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION TRAVIS + ALICE THOMPSON 89 PUKOLU WAY KIHRI HI 96753		250	
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION CHRIS HAET 74 WAILANI ST. WAILUKU HI 96793		200	
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION KATHY LUI CARRUT 318 N MARKET ST WAILUKU HI 96793		100	
6/7	<input type="checkbox"/> NON-MONETARY CONTRIBUTION ALAN YAMAMOTO 140 N MARKET ST. WAILUKU HI 96793		100	
1. SUBTOTAL OF MONETARY AND NON-MONETARY CONTRIBUTIONS THIS PERIOD (This Page).....			1300	
2. TOTAL MONETARY AND NON-MONETARY CONTRIBUTIONS THIS PERIOD (Last Page Only) (Transfer total to the applicable Line Number of the Disclosure Report - 11(a)(ii) or 11(b)(ii)).....				

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STATE OF HAWAII
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MONETARY AND NON-MONETARY CONTRIBUTIONS
CANDIDATE COMMITTEE

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CANDIDATE AND CANDIDATE COMMITTEE NAME:

PAGE 4 OF 4

DATE OF DEPOSIT OR RECEIPT OF NON-MONETARY CONTRIBUTION	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF DONOR	FOR AGGREGATES OF \$1,000 OR MORE NAME OF EMPLOYER	AMOUNT OF CONTRIBUTION OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD	AGGREGATE ELECTION PERIOD TOTAL TO DATE
	IF A DEPENDENT MINOR, ENTER NAME OF PARENT	OCCUPATION		
6/11	<input type="checkbox"/> NON-MONETARY CONTRIBUTION RUSSELL YAMANE 2158 MAIN ST. WAILUKU HI 96793		200	
✓	<input type="checkbox"/> NON-MONETARY CONTRIBUTION GARAND ONAGA 1865 MAIN ST 103 WAILUKU HI 96793		150	
✓	<input type="checkbox"/> NON-MONETARY CONTRIBUTION DAVA JONES 60 KAHU RD MAKAWAO HI		100	
7/12	<input type="checkbox"/> NON-MONETARY CONTRIBUTION SAMMY WILSON PO BOX 1327 KIHATI HI 96753		200	
7/12	<input type="checkbox"/> NON-MONETARY CONTRIBUTION			
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION			

1. SUBTOTAL OF MONETARY AND NON-MONETARY CONTRIBUTIONS THIS PERIOD (This Page).....
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450

3920

Form CC-5(A) (Rev. 5/99)

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